



June 19, 2012

Office of the FCC Secretary  
Marlene H. Dortch, Secretary  
Federal Communications Commission  
445 12<sup>th</sup> Street SW  
Washington, DC 20554

USAC  
2000 L Street NW  
Suite 200  
Washington, DC 20036

RE: Annual Certification Filing, WC Docket No. 10-90

Attached is the annual reporting certification pursuant to Section 54.313(a)(2) – (a)(6).

I am authorized to make this certification on behalf of the company named above. This certification is provided for study area 120038.

Sincerely,

A handwritten signature in black ink, appearing to read "Art Nicholson", is written over a horizontal line.

Art Nicholson  
V.P. Operations

Enc.

**Annual Reporting Requirements pursuant to § 54.313(a)(2)-(6)**

**WC Docket No. 10-90**

§ 54.313(a)(2) – Outage reporting

  X  

My company was not required to collect this information in 2011.

My company collected this information pursuant to state utility commission requirement.  
A copy of the report is attached.

§ 54.313(a)(3) – Unfulfilled service requests

My company was not required to collect this information in 2011.

  X  

My company collected this information pursuant to state utility commission requirement.  
A copy of the report is attached.

§ 54.313(a)(4) – Customer complaints per 1000 connections

My company was not required to collect this information in 2011.

  X  

My company collected this information pursuant to state utility commission requirement.  
A copy of the report is attached.

§ 54.313(a)(5) – Service quality standards and consumer protection rules

I certify that the reporting carrier is in compliance with applicable service quality standards and consumer protection rules.

§ 54.313(a)(6) – Ability to function in emergency situations

I certify that the reporting carrier can function in emergency situations as set forth in 47 CFR §54.202(a)(2). Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.

I am authorized to make this certification on behalf of the company named above and, to the best of my knowledge the information reported on this form is accurate. This certification is for the study area(s) listed below. **(Please enter your Company Name, State and Study Area Code)**

Company Name	State	Study Area Code
Bretton Woods Telephone Company, Inc.	NH	120038

(If necessary, attach a separate list of additional study areas and check this box.)

☐

Signed,



\_\_\_\_\_  
[Signature of Corporate Officer]

**Art Nicholson**

\_\_\_\_\_  
[Printed Name of Corporate Officer]

**V.P. Operations**

\_\_\_\_\_  
[Title of Corporate Officer]

Date:

**06/19/2012**

Carrier's Name    Bretton Woods Telephone Company, Inc.

Carrier's Address    171 Mt. Washington Hotel Rd., Bretton Woods, NH 03575

Carrier's Telephone Number    (603) 278-9911



## REPORT OF CUSTOMER TROUBLES

For Calendar Year 2011

### 1. General Information

'Federal Identification Number 13-2968084

Legal Name Bretton Woods Telephone Co.

Trade Name (d/b/a)  
in New Hampshire \_\_\_\_\_

Contact Person (Name/Title) Arthur Nicholson

Mailing Address 171 Mt. Washington Hotel Rd.  
Bretton Woods NH 03575

Phone Number 603-278-9911

Fax Number \_\_\_\_\_


E-mail Address bwtelco@worldsurfer.net

### 2. Requirements

Attachment A: see below

### 3. Signature and Certification

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized  
Representative Signature  Title Administrative Assist

Printed Name Marcia Rouillard Date 2/1/12

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.  
Please mail any documents to the above address.

*2/6/12 uploaded*



Attachment A

REPORT OF CUSTOMER TROUBLES

Month Ending: Dec 2011

Customer Troubles Reported				Access Lines	
Month	For Tel Co Action	Referred Out	Total Reported to Co	(A) Total	(B) Index
January	3	1	3	643	0.47
February	3	3	3	642	0.47
March	0	0	0	642	0
April	1	0	1	638	0.16
May	2	2	2	633	0.32
June	2	1	2	616	0.32
July	3	2	3	620	0.48
August	3	2	3	615	0.49
September	3	3	3	614	0.49
October	3	3	3	609	0.49
November	3	2	3	608	0.49
December	2	1	2	610	0.33

Date: \_\_\_\_\_  
Signed: [Signature]  
Title: Admin. Assist.

(A) USE MONTHLY TOTAL (WHEN NOT AVAILABLE, USE YEAR END TOTAL OF PREVIOUS YEAR).

(B) INDEX (% TROUBLES/100 TELEPHONES) = TOTAL TROUBLES x 100/TOTAL ACCESS LINES.

The ILEC shall file a monthly rolling report showing the current monthly data and the data for each previous month in that calendar year, such that the final report of the year shall show an entire year of data.



## QUALITY OF SERVICE REPORT

For Calendar Year 2011

### 1. General Information

Federal Identification Number	13-2968084
Legal Name	Bretton Woods Telephone Co.
Trade Name (d/b/a) in New Hampshire	
Regulatory Contact	Arthur Nicholson
Complete Mailing Address	171 Mt. Washington Hotel Rd. Bretton Woods, NH 03575
Phone Number	603-278-9911
Fax Number	603-278-9913
E-mail Address	bwtelco@worldsurfer.net

### 2. Service Installation

- |  |   |
|--|---|
| 1. INSTALLATION OF POTS Average number of days between date of a request for service and installation of that service. | 1 |
| 2. Percentage of installation appointments not kept.   | 0 |
| 3. Narrative explanation of special circumstances and exceptions reflected in the data reported by the carrier.        |   |
|  |   |
|  |   |
|  |   |

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### 3. Repair Service

1. Average answer time to connect caller to repair service operator.	<u>30 secs</u>
2. Percentage of calls to a repair number that are abandoned.	<u>0</u>
3. Percentage of service outages lasting longer than 24 hours.	<u>0</u>
4. Average length of repair time (elapsed time from report of trouble until trouble cleared).	<u>1hr</u>
5. Percentage of repair appointments not kept.	<u>0</u>
6. The average number of calculated customer trouble reports per 100 access lines for the year.	<u>.37</u>

### 4 Signature

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized Representative  
Signature

Marcia Rouillard

Title Administrative Assist

Printed Name Marcia Rouillard

Date 2/1/12

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.  
Please mail any documents to the above address.